Case 19-11372-btb Doc 17 Entered 03/27/19 00:03:58 Page 1 of 6

Fill in this in	formation to ide	ntify your case:		
Debtor 1	JOEL CROSE	BY SINNOTT		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Midd l e Name	Last Name	
United States E	Bankruptcy Court fo	r the: District of Nevada		~
Case number	19-11372-BT	ъ		
(If known)				

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Pa	rt 1: List All of Your PRIORITY Unsecure	ed Claims			
1.	Do any creditors have priority unsecured claims	s against you?			
	✓ No. Go to Part 2.				
	☐ Yes.				
2.	List all of your priority unsecured claims. If a creeach claim listed, identify what type of claim it is. If nonpriority amounts. As much as possible, list the control of the control o	editor has more than one priority unsecured claim, list the a claim has both priority and nonpriority amounts, list the claims in alphabetical order according to the creditor's natural Part 1. If more than one creditor holds a particular claim partructions for this form in the instruction booklet.	at claim here a ame. If you hav	nd show both e more than t	priority and wo priority
	(· ·· ·· ·· · · · · · · · · · · · · · ·	,	Total claim	Priority	Nonpriority
			rotal olaiiii	amount	amount
2.1	Priority Creditor's Name	Last 4 digits of account number	\$	_ \$	\$
	Number	When was the debt incurred?			
2.2	City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Priority Creditor's Name Number Street	As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply	· \$	\$\$	\$\$
	City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	☐ Contingent ☐ Unliquidated ☐ Disputed Type of PRIORITY unsecured claim: ☐ Domestic support obligations ☐ Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated ☐ Other. Specify			

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Part 1: Your PRIORITY Unsecured Claims — Continuation Page

Afte	er listing any entries on this page, number them	beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount
		Last 4 digits of account number	\$	\$	\$
	Priority Creditor's Name	When was the debt incurred?			
	Number Street				
		As of the date you file, the claim is: Check all that apply.			
	City State ZIP Code	☐ Contingent☐ Unliquidated			
	Who incurred the debt? Check one.	☐ Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only	☐ Domestic support obligations			
	□ Debtor 1 and Debtor 2 only□ At least one of the debtors and another	☐ Taxes and certain other debts you owe the government			
	☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated			
	Is the claim subject to offset?	Other. Specify			
	□ No				
	☐ Yes				
		Last 4 digits of account number	\$	\$	\$
	Priority Creditor's Name	When was the debt incurred?			
	Number Street				
	·	As of the date you file, the claim is: Check all that apply.			
	City State ZIP Code	☐ Contingent ☐ Unliquidated			
	·	☐ Disputed			
	Who incurred the debt? Check one	Tune of PRIORITY unpopulated algins			
	☐ Debtor 1 only ☐ Debtor 2 only	Type of PRIORITY unsecured claim:			
	Debtor 1 and Debtor 2 only	 Domestic support obligations Taxes and certain other debts you owe the government 			
	At least one of the debtors and another	☐ Claims for death or personal injury while you were			
	☐ Check if this claim is for a community debt	intoxicated Other. Specify			
	Is the claim subject to offset?	· · ·			
	□ No				
	Yes				
	Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
		When was the debt incurred?			
	Number Street	As of the date you file, the claim is: Check all that apply.			
		☐ Contingent			
	City State ZIP Code	☐ Unliquidated			
	Who incurred the debt? Check one.	Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Domestic support obligations			
	☐ At least one of the debtors and another	☐ Taxes and certain other debts you owe the government☐ Claims for death or personal injury while you were			
	☐ Check if this claim is for a community debt	intoxicated Other. Specify			
	Is the claim subject to offset?				
	□ No				
	Yes				

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	ISTAIL OF TOUR ROTTE		ocourca Gianno			
3.	Do any creditors have nonpriority ☐ No. You have nothing to report i ☑ Yes					
	nonpriority unsecured claim, list the	creditor separ creditor holds	ately for each clair	order of the creditor who holds each claim. If a creditor has m. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no	list claims a	Iready
					Total clair	n
4.1	Davidaya Bank Dalayyana			7 0 0 7		
	Barclays Bank Delaware Nonpriority Creditor's Name			Last 4 digits of account number 7 6 8 7	s 4,	434.72
	, , , , , , , , , , , , , , , , , , ,			When was the debt incurred? 02/05/2007	Ψ	
	PO Box 8803 Number Street					
	Wilmington	DE	19899			
	City	State	ZIP Code	As of the date you file, the claim is: Check all that apply.		
				☐ Contingent		
	Who incurred the debt? Check one			Unliquidated		
	Debtor 1 only			☐ Disputed		
	Debtor 2 only					
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and and	other		☐ Student loans		
	☐ Check if this claim is for a com	amunity dobt		Obligations arising out of a separation agreement or divorce		
		imunity debt		that you did not report as priority claims		
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts		
	No			Other. Specify Credit Card		
	□ Yes					
4.2	Dept of Education / Navient	·		Last 4 digits of account number 2 8 4 1	\$	419.11
	Nonpriority Creditor's Name	-		When was the debt incurred? 03/31/2010		
	PO Box 9635					
	Number Street			_		
	Wilkes-Barre	PA	18773	As of the date you file, the claim is: Check all that apply.		
	City	State	ZIP Code	Contingent		
	Who incurred the debt? Check one			Unliquidated		
	Debtor 1 only			☐ Disputed		
	Debtor 2 only					
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and and	other		☑ Student loans		
	☐ Check if this claim is for a com	nmunity debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
	Is the claim subject to offset?			☐ Debts to pension or profit-sharing plans, and other similar debts		
	No			Other. Specify		
	Yes					
4.3	Decemb Destitutions (
	Desert Radiologists Nonpriority Creditor's Name			Last 4 digits of account number3420	\$	781.20
	Nonpholity Greator's Name			When was the debt incurred? $\frac{10/27/2015}{}$		
	Number Street			-		
				As af the data was file the alster to Ole 1. II II at a 1		
	City	State	ZIP Code	 As of the date you file, the claim is: Check all that apply. 		
	Who incurred the debt? Check one			Contingent		
	Debtor 1 only	•		Unliquidated		
	Debtor 2 only			☐ Disputed		
	Debtor 1 and Debtor 2 only			Type of NONDRIGHTY		
	At least one of the debtors and and	other		Type of NONPRIORITY unsecured claim:		
	Chook if this plains is for a serve	amunitu dabt		Student loans		
	☐ Check if this claim is for a con	munity debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts		
	☑ No			✓ Other. Specify 5 medical bills		
	☐ Yes			· · ·		

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Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

Afte	r listing any entries on this page, number them beginning with	4.4, followed by 4.5, and so forth.	Total claim
		Last 4 digits of account number	\$
	Nonpriority Creditor's Name	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Contingent Unliquidated	
	Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Disputed	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim: Student loans	
	☐ At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
	□ No □ Yes	Guier. Specify	
		Last 4 digits of account number	\$
	Nonpriority Creditor's Name	- When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code Who incurred the debt? Check one.	Contingent Unliquidated	
	Debtor 1 only Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 	
	Is the claim subject to offset? □ No	Other. Specify	
	Yes		
		Last 4 digits of account number	\$
	Nonpriority Creditor's Name	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Contingent Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	☐ Disputed	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset? ☐ No ☐ Yes	Other. Specify	
			_

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Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. PLUSFOUR, INC. On which entry in Part 1 or Part 2 did you list the original creditor? 6345 Pecos Road, Suite 212 Line 4.3 of (Check one):
Part 1: Creditors with Priority Unsecured Claims Number Street Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number 3 4 2 0 NV 89120 Las Vegas ZIP Code City State On which entry in Part 1 or Part 2 did you list the original creditor? Name Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims Number ■ Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number ___ _ City State ZIP Code On which entry in Part 1 or Part 2 did you list the original creditor? Name Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims Number ■ Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number ____ State ZIP Code City On which entry in Part 1 or Part 2 did you list the original creditor? Name Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Number ■ Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number ___ _ City State ZIP Code On which entry in Part 1 or Part 2 did you list the original creditor? Name Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Number ☐ Part 2: Creditors with Nonpriority Unsecured Last 4 digits of account number ___ __ __ __ State ZIP Code City On which entry in Part 1 or Part 2 did you list the original creditor? Name Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims Number Street Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number ____ City On which entry in Part 1 or Part 2 did you list the original creditor? Name Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Number ☐ Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number ___ __ __ _ City State ZIP Code

Part 4:

First Name Middle Nar

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims	6a. Domestic support obligations	6a.	\$	0.00
from Part 1	6b. Taxes and certain other debts you owe the government		\$	0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$	0.00
	6e. Total . Add lines 6a through 6d.	6e.	\$	0.00
			Total claim	
Total claims	6f. Student loans	6f.	Total claim	419.11
Total claims from Part 2	6f. Student loans6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6f. 6g.		419.11
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority		\$	
	 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other 	6g.	\$	0.00
	 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. 	6g. 6h.	\$\$\$\$	0.00